

Transportation and Infrastructure Subcommittee on  
Economic Development, Public Buildings, and  
Emergency Management

Hearing on:

“National Preparedness System: What Are We Planning For?”

Testimony of

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Thank you, Mr. Chairman and members of the subcommittee for your gracious invitation to testify at this hearing. I am pleased to appear before you today to discuss the national preparedness system and the role of the American Red Cross in disaster response. My name is Armond Mascelli and I am Vice President of Domestic Response for the American Red Cross at national headquarters here in Washington, D.C.

For more than 123 years, the mission of the Red Cross has been to help Americans prevent, prepare for, and respond to emergencies. Chartered by Congress in 1905 to provide a system of disaster response and to mitigate suffering caused by disaster, it continues to meet this mandate today. We have a long and proven track record of immediate response to major disasters, both natural and manmade. Over the past year, the Red Cross responded to more than 70,000 disasters ranging from single house fires to the devastating southeastern hurricanes. At the same time, the Red Cross continues to aggressively prepare for the possibility of another terrorist attack on American soil.

Governed by volunteers and supported by community donations, the Red Cross is a nationwide network of nearly 900 chapters, eight regional service areas and 36 blood services regions dedicated to saving lives and helping people prevent, prepare for and respond to emergencies. Led by 1 million volunteers and 36,000 employees, trains nearly 12 million people in lifesaving skills and keeps U.S. military families connected worldwide. Operating a single system, the Red Cross is the largest supplier of blood and blood products to more than 3,000 hospitals across the nation and also assists victims of international disasters and conflicts at locations worldwide.

The Red Cross provides a unique community based network to support all-hazard disaster preparedness and response in your districts, to your constituents, each and every day. As a key member of the first response community with expertise in meeting the human needs associated with disasters, we are integrated into state and local government agency disaster planning,

exercises and response efforts. While systems and strategies are important, the American public is our client to whom we ultimately direct our services.

### **TOPOFF 3 Exercise**

Mr. Chairman, this hearing is timely as the Red Cross just completed the TOPOFF 3 exercise with the Department of Homeland Security (DHS) and other federal, state and local government partners as well as our private sector partner. We have participated in all three TOPOFF exercises. During this latest, more than 600 of our employees and volunteers, 32 chapters in CT and NJ, as well as two Blood Divisions, two Blood Services Regions, the National Testing and Reference Laboratory and one National Testing Laboratory actively participated. We used this exercise to test and ultimately strengthen our organization's capacity for an effective, coordinated response to large-scale natural and manmade disasters. While we remain concerned that overall, exercises have not addressed the long-term human services needs of disaster victims, TOPOFF 3 did effectively test the critical role the Red Cross plays in enhancing the nation's disaster preparedness and response capabilities under the National Response Plan (NRP).

### **National Incident Management System and the National Response Plan**

We were pleased to work with DHS and other federal agencies during the development of the NRP and the National Incident Management System (NIMS). The significance of these documents can not be understated as they encompass the core of how we will work collaboratively to assist our nation and its people in need. We believe NIMS is a comprehensive system to execute a consistent nationwide approach for governments at all levels, the private sector and non-governmental organizations. NIMS will foster greater efficiency and effectiveness within the disaster community to prepare for, respond to, and recover from domestic incidents.

Building on our responsibilities under the Federal Response Plan, we were actively engaged in the policy discussions with DHS throughout the NRP's development. The majority of our policy and operational issues were integrated into each of the components of the final NRP—the Base Plan, Appendices, Emergency Support Functions, and the Incident and Support Annexes. A comprehensive list of our Primary Agency, Support Agency and Cooperating Agency roles in the NRP is respectfully submitted for the record. Specifically, the Red Cross serves as Primary Agency for mass care (ESF #6) responsible for the provision of food, shelter, emergency first aid, disaster welfare information, and bulk distribution of emergency relief items.

Before, during and after disasters strike, our emergency shelter services for disaster victims includes the use of pre-identified shelter sites in existing structures, creation of temporary facilities or the temporary construction of shelters, and use of similar facilities outside the disaster-affected area should evacuation be necessary. Feeding services are provided to disaster victims and emergency workers through a combination of fixed sites, mobile feeding units, and bulk distribution of food. Red Cross disaster welfare information services provide timely, accurate and verified information regarding individuals residing within the affected disasters areas. Information is collected and provided to immediate family members outside the affected area through identified systems. Disaster welfare information is also provided to aid in

reunification of family members within the affected area who were separated at the time of the disaster.

The Red Cross also serves as a Support Agency to the Department of Health and Human Services for Public Health and Medical Services (ESF #8), providing blood in coordination with AABB Inter-organizational Task Force on Domestic Disasters and Acts of Terrorism, mental health services, and disaster health services. We have also undertaken an expanded function under the NRP within external affairs (ESF #15) to help disseminate accurate and timely information to those affected during an incident to help better protect themselves. Ultimately our activities in the NRP focus on meeting the human needs associated with disasters.

### ***The Client Assistance Network***

Of course none of our disaster services can be provided without effective partnerships. Perhaps this is best illustrated in the development of the Coordinated Assistance Network (CAN). CAN was created to ease the burden on those seeking assistance following a disaster. The Red Cross joined six other prominent national and regional agencies that share a common vision to shape the future of disaster relief. Arising from the lessons learned during the September 11, 2001 response, this partnership focuses on how clients are served, not just by one agency, but by an entire system of relief agencies.

From a client perspective, a disaster victim can visit any one of the participating agencies, tell his/her story, provide required documentation, and—with his/her permission—have that information shared automatically with the partner agencies that are able to help them. From an agency perspective, CAN provides the framework to make casework management easier and more efficient than ever. Through a secure, web-based system, an agency can instantly review the client's specific situation and the services received—in *real time*—helping provide better service to the client, eliminate duplication of benefits, and measurably lessen the burden for each participating agency.

I am pleased to report CAN was deployed during last year's hurricanes and work in six pilot cities is beginning and will focus on the development of inter-agency service delivery models and the technology to support such collaboration.

### ***Catastrophic Incident Annex and Supplement***

Under the NRP's Catastrophic Incident Annex/Supplement (CIA/S), the Red Cross is responsible for the provision of mass care during an incident that results in extraordinary levels of mass casualties or severe population disruption. We are partnering with DHS to move beyond the day to day and annual natural disasters to address scenarios previously unimaginable. To fully execute our responsibilities, the Red Cross developed the *Mass Care Catastrophic Planning Initiative* which outlines a three-phased strategy to address catastrophic disaster mass care planning. During phases I and II, the Red Cross will use its expertise in mass care planning and operations coupled with its extensive partnerships, cooperation and coordination with federal, state and local emergency management officials to establish the necessary mass sheltering and feeding plans in the 30 largest U.S. Metropolitan Statistical Areas which cover the 50 Urban Area Security Initiative cities designated by DHS. In Phase III, we will initiate the necessary activities to enhance and sustain the systems and measures established during the first two years. Implementation is based on two objectives:

*Develop and test catastrophic disaster mass care response plans that will address the needs of 300,000 people for 90 days.*

The activities under this objective focus on developing the resiliency of local communities so they are less dependent on external assistance. Specific attention is paid to vulnerability and capacity assessments; facility identification; mass care personnel identification and training; operations planning; security assessment and planning; and inter-agency coordination. The plans will address actions to be taken by the area directly affected by the disaster, as well as the adjacent metropolitan areas that will be providing evacuation and mass care support. It will force communities to look at mass care in a more comprehensive, integrated way reaching beyond their local borders on a scale previously not envisioned.

*Create and support a nationwide network for mass care planning and response.*

The activities under this objective focus on the development of back-up systems to fill the gaps in local response capabilities. Specific attention will be paid to developing a national mass care cadre system; the deployment and support of the CAN client information sharing system; development of a national database of sheltering and feeding facilities; relief supplies and equipment acquisition; and national coordination.

While we welcome the challenge of this important role, we remain concerned that unlike the other signatories to the NRP, the Red Cross is included in no federal agency's budget request submitted to Congress. ***The Red Cross has the expertise, experience commitment and organizational structure to implement this initiative but it is not the responsibility of the charitable public to fund the responsibilities associated with the NRP Catastrophic Annex/Supplement that the government requires and the American public will need.***

While this initiative is national in scope, it is local in focus and aggressively engages the participation of local government agencies, volunteers and nongovernmental organizations to meet the sense of urgency prompted by the new requirements that the CIS/A impose. We believe that an immediate investment by our federal partners now will sharply reduce the need for expenditure of significant government resources post incident. The Red Cross must have adequate levels of funding for our catastrophic planning activities to fully execute our responsibilities under the NRP.

We remain a willing partner, welcome the challenge that an expanded role under the NRP will bring and are enthusiastic about bringing our experience, resources, and partnerships to bear in support of its implementation. Just as natural disasters are unpredictable, terrorist intentions can not be predicted. As such, we must view the NRP as dynamic document that must evolve within the emerging homeland security environment. We will continue to work closely with DHS as it conducts its one year review to assess the implementation process. We will also work closely as DHS undertakes its NPR four year review and reissuance cycle.

### **National Preparedness Goal**

We commend the work of DHS as it creates effective public policy stemming from HSPD-8, in particular the development of a standardized approach to preparedness that assesses needs and

defines priorities. Recognizing the experience and expertise of the Red Cross, our President and CEO Marty Evans was named in November by DHS to the HSPD-8 Senior Steering Committee.

As significant measures have been taken by government entities and private sector organizations to increase operational preparedness, the needs of the public must be included in developing policy to fully address national preparedness. In communities across the country, the Red Cross serves as a vehicle for the public to become engaged in making their communities safer from disasters. Building upon this experience, the Red Cross has collaborated extensively with DHS to help increase preparedness of the public--a critical component to all-hazards disaster preparedness and response.

This past July, the Red Cross, DHS, the George Washington University Homeland Security Policy Institute and the Council for Excellence in Government partnered to convene “Public Preparedness – A National Imperative,” a symposium of recognized leaders in disaster preparedness, response and recovery. The symposium identified the challenges and barriers to public preparedness and the needs and expectations of the public both during and after disaster. A copy of the symposium report for the subcommittee’s review is respectfully submitted for the record.

***Undoubtedly, empowering the public to know what to do in the event of disaster will lessen the burden upon the first response community and government at all levels.*** Limiting preparedness to operational capability, thereby excluding public preparedness, runs counter to the July 2002 National Strategy for Homeland Security which affirms homeland security as a shared national responsibility with the American people. Accordingly, we have strongly recommended during development of the Goal that public preparedness be thoroughly addressed. To our delight, the *vision* outlined in the Interim National Preparedness goal now includes the general public as an active participant to achieve and sustain risk-based target levels of capabilities. The Red Cross stands ready to assist local, state, regional and federal partners within the disaster preparedness and response community move from theory to practice in implantation of the Goal’s *vision*.

Additionally, in recognition of the vital role they play in strengthening the preparedness of the United States we urged the inclusion of NGOs in National Preparedness Goal as partners with governmental and tribal entities in developing homeland security capabilities. NGOs such as the Red Cross bring additional resources that enable the governments at all levels to focus on other areas of preparedness and response.

NGOs are now repeatedly listed throughout the Interim National Preparedness Goal, including in the *vision*. Through our numerous memorandums of understandings, affiliations and other strategic partnerships, we look forward to helping integrate and leverage NGOs in the implementation of the Goal.

#### **Universal Task List and Target Capabilities List**

The Universal Task List (UTL) will provide a common language and reference point for all of agencies which respond to disasters. However, it does not mandate how a task is performed, only that it needs to be addressed. The Red Cross has worked closely with DHS to ensure that the tasks listed under #20. Mass Care (Sheltering, Feeding and Related Human Services) of the

Goals' corresponding draft guidance are reflective of the myriad challenges that must be planned for and executed in the mass care arena. Such a listing is required to successfully provide services after an major disasters.

We believe the current Target Capabilities List (TCL) included in the Goal is well conceived and includes practical competencies that government entities can reasonably be expected to develop and maintain. Specifically, we are pleased that *citizen preparedness and participation* has been included in the TCL. As previously described, the public is a vital component of all hazards preparedness. The addition of *mass care, medical surge* and *volunteer management and donations* show that DHS is recognizing the human needs associated with disasters. We look forward to using our community based experience and expertise to assist our government partners in strengthening their capacity to meet the public need.

In conclusion, we value the close relationship with our government partners and appreciate your continued interest in these important issues. Mr. Chairman, I stand ready to answer any questions the subcommittee may have.